

EXHIBIT 3

<p style="text-align: right;">Page 94</p> <p>1 have been this most recent year you filed your taxes 2 for. 3 A. Yeah. 4 Q. So let's go back. Let's not go to -- let's go to this 5 year, 2024. You haven't filed taxes yet, but we're 6 coming to the yearend. How much have you -- has each 7 corporate entity been able to bring in this year? 8 A. I think -- profit wise? 9 Q. Yes. 10 A. Around \$2 million for me. 11 Q. So you've had a good year this year? 12 A. Yeah, I worked very hard. I did. 13 Q. I'm sure you do. And your husband? 14 A. He did like, I think, \$500,000. 15 Q. Okay. So obviously a definite portion of this comes 16 from government payments to you, correct? 17 A. Um-hmm. 18 Q. That's a yes? 19 A. Yes. 20 Q. Isn't it important for you to know how to bill properly 21 so that you're only being paid for what the government 22 legally allows you to be paid for? 23 A. Yes. 24 Q. Or do you not care? 25 A. No, of course I care. And the idea that everything is</p>	<p style="text-align: right;">Page 96</p> <p>1 A. I spoke to the biller two months ago. We talk to each 2 other. 3 Q. Do you know what the nature of our lawsuit is here? 4 A. Yes. 5 Q. What do you understand we're claiming you did wrong? 6 A. No. You're claiming I fired her because I thought that 7 she thought we were doing something wrong. 8 Q. Okay. 9 A. Instead of firing her for poor performance. 10 Q. With regard to whether or not my client's complaints 11 about what you were doing wrong are accurate, do you 12 know sitting here today if she's correct? 13 A. She's inaccurate. 14 Q. Well, have you done an investigation? 15 A. Yes. 16 Q. What did you investigate? 17 A. How things were being billed. 18 Q. Okay. What did you do? Who did the investigation, you 19 personally? 20 A. I did it with the biller. We reviewed stuff. 21 Q. Okay. And who's the biller you're referring to here? 22 A. Simrath. 23 Q. Okay. And is there a written investigation result or 24 report? 25 A. No.</p>
<p style="text-align: right;">Page 95</p> <p>1 done correctly. That's why the biller oversees it. She 2 understands it better than I do. So I just try to help 3 save her some time as far as just putting in codes of 4 things that were done. But as far as servicing and 5 that, they manage that. They have a list of when I am 6 or am not in the building, which PA sees the patient, 7 and they put that in. 8 Q. So you don't know if fraud is occurring in your office? 9 A. No, there is no fraud occurring. 10 Q. Well, how do you know that? Because you don't know 11 what they're doing, and you don't know what the rules 12 are. How do you know that? You just turn it over to 13 the biller, and you don't know what the biller puts in. 14 That's what you've just told me. 15 A. No, I don't. You're asking me for like nuance things. 16 I'm giving you -- 17 Q. I'm not asking you for nuance things. 18 A. Yeah, you are. 19 Q. I'm asking you whether you are aware of whether fraud 20 has occurred in your office with regard to how things 21 are billed to the government? 22 A. No, we bill correctly. 23 Q. Well, how do you know that? 24 A. Because I've spoke to the biller about it. 25 Q. When did you last speak to the biller?</p>	<p style="text-align: right;">Page 97</p> <p>1 Q. Okay. What did you do to investigate my client's 2 claims? 3 A. We reviewed the processes of how things are billed, and 4 what was being put down. 5 Q. So then you do know how they were billed, and what was 6 being put down? 7 A. Yes. 8 Q. So you told me a few minutes ago you didn't know. It 9 was completely up to the biller. 10 A. No, you're asking me for servicing provider and billing 11 provider, and they mean different things in different 12 instances. 13 Q. Right. So why don't you explain that to me. 14 A. I don't know that, because she fills it out. 15 Q. Okay. 16 A. I'm not a biller. That's why I hired her. 17 Q. Have you ever had a physician assistant who has been 18 the billing -- who's had her name on the billing as the 19 provider? 20 A. Yes. 21 Q. For services? 22 A. Absolutely. 23 Q. And how many times has that happened? 24 A. It happens when I'm not there. 25 Q. Okay. So when did that begin?</p>

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<p style="text-align: right;">Page 98</p> <p>1 A. After COVID rules ended.</p> <p>2 Q. Okay. And what do you understand the COVID rules were?</p> <p>3 A. That the physician did not have to be present.</p> <p>4 Q. Under what circumstances?</p> <p>5 A. There was the circumstance as long as they could be gotten ahold of.</p> <p>6 Q. Where'd you get that information from?</p> <p>8 A. From the CMS.</p> <p>9 Q. I'm sorry?</p> <p>10 A. CMS.</p> <p>11 Q. What have you read from CMS that makes you say to me here today that you didn't -- as long as you could be gotten ahold of, I think was how you put it, what are you relying on for that? Is that for anybody that comes into your office so long as you could have been gotten ahold of it's legal?</p> <p>17 A. Yes.</p> <p>18 Q. Okay. And where do you get that information from?</p> <p>19 A. From, I just told you, CMS.</p> <p>20 Q. I'm sorry?</p> <p>21 A. CMS.</p> <p>22 Q. Okay. And what did you read from CMS about COVID?</p> <p>23 A. That because of the situation with COVID, that as long as the physician could be gotten ahold of that they could bill.</p>	<p style="text-align: right;">Page 100</p> <p>1 loosened the rule for telehealth too.</p> <p>2 Q. Okay. Where do I find that what you're referring to as a physician who was responsible for these practices?</p> <p>4 Where do I find that?</p> <p>5 A. CMS. I'd have to get it to you.</p> <p>6 Q. Do you have something that says that?</p> <p>7 A. I believe I do. I don't have it on me.</p> <p>8 Q. And did you have any training on that?</p> <p>9 A. No.</p> <p>10 Q. What format did you become aware of that in?</p> <p>11 A. Piece of paper.</p> <p>12 Q. I mean, did you get something online? How did you become aware of this new policy?</p> <p>14 A. Online.</p> <p>15 Q. And are you guessing? Sounds like you're not sure.</p> <p>16 A. It was a while ago. I can't remember exactly.</p> <p>17 Q. So you can't tell me anything here today that you recall specifically reading about the COVID protocols; is that correct?</p> <p>20 A. No. I just told you I did read it, but I can't remember exactly where I found it.</p> <p>22 Q. So during COVID, you were billing for procedures for servicing a patient when you did not actually see the patient, correct?</p> <p>25 A. They were all my patients, so I knew everything about</p>
<p style="text-align: right;">Page 99</p> <p>1 Q. Okay. And do you think that what you just told me is accurate?</p> <p>3 A. Yes.</p> <p>4 Q. Hang on a second, please. Sorry. Okay. In order for you to be out of the office, and be able to bill as a physician, based on COVID, did you have to do a case by case analysis of that particular patient coming into the office to see you personally?</p> <p>9 A. No.</p> <p>10 Q. You're not aware that in order to be able to render services and bill, excuse me, to be able to bill for services when you're not in the office during COVID, it had to be -- there had to be a medically indicated reason on a case-by-case basis? You're not aware of that?</p> <p>16 A. Medically indicated? What do you mean?</p> <p>17 Q. Yeah, because you had COVID or something, and couldn't see the patient in person.</p> <p>19 A. I don't think that's what that meant.</p> <p>20 Q. What what meant? What are you saying when you said that meant? What are you referring to? Go ahead.</p> <p>22 A. My understanding of it was that because of the stressful nature of the COVID situation where physicians were placed in hospitals, and couldn't get to places, that they loosened the rule. They also</p>	<p style="text-align: right;">Page 101</p> <p>1 them.</p> <p>2 Q. I didn't ask you that.</p> <p>3 A. Well, you're acting like I don't know the patient. I knew the patients.</p> <p>5 Q. You know what, I didn't act like that. What I said was you were billing for servicing a patient when you did not service a patient in the office, correct?</p> <p>8 A. Me personally, no.</p> <p>9 Q. Okay. And during COVID, did you use telehealth where you were on a video with a patient?</p> <p>11 A. In certain circumstances.</p> <p>12 Q. Okay. And how many circumstances were those? Is that on the calendar?</p> <p>14 A. Sometimes they put it in. My patients have to be seen in person mostly. But if it was a wound check or something, you could do it.</p> <p>17 Q. So then who saw the patient during COVID?</p> <p>18 A. You mean the telehealth?</p> <p>19 Q. The physician.</p> <p>20 A. I would always do the telehealth.</p> <p>22 Q. Hang on a second. So let's stick with the COVID protocol. So do I have it right that what was happening was the physician's assistant was seeing the patient in the office, but you were remote somewhere else and could be reached by phone?</p>

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<p style="text-align: right;">Page 102</p> <p>1 A. In certain circumstances, yes.</p> <p>2 Q. And you think that was protected, and gave you the 3 ability to -- even if you never saw the patient, to 4 bill as the servicer, correct?</p> <p>5 A. Yes.</p> <p>6 Q. So wasn't the purpose of the law to not expose a doctor 7 and a patient?</p> <p>8 MR. BREAUGH: Object for speculation.</p> <p>9 A. I don't know.</p> <p>10 BY MS. GORDON:</p> <p>11 Q. I didn't get my question out yet.</p> <p>12 A. No.</p> <p>13 Q. Okay. That wasn't the purpose of the law?</p> <p>14 A. No.</p> <p>15 MR. BREAUGH: Objection to speculation.</p> <p>16 BY MS. GORDON:</p> <p>17 Q. And during COVID, did you see any patients that you 18 would not ordinarily have seen?</p> <p>19 A. I don't understand.</p> <p>20 Q. Were you treating people for COVID? Were you rushing 21 to the hospital to treat a COVID patient? I assume 22 not?</p> <p>23 A. No, I treated COVID patients. I had to cut off legs, 24 and try to save people's arms. Yeah, I was grossly 25 involved in that as well.</p>	<p style="text-align: right;">Page 104</p> <p>1 mean, I was in the office. They didn't necessarily see 2 patients by themselves all the time.</p> <p>3 Q. Were your PAs seeing patients virtually?</p> <p>4 A. No.</p> <p>5 Q. When I get your patient billing records am I going to 6 see any patients for the year 2022 where a PA used her 7 name for the billing, billing of services as compared 8 to your name?</p> <p>9 A. Yes.</p> <p>10 Q. Okay. How many times is that going to occur?</p> <p>11 A. A few hundred.</p> <p>12 Q. A few hundred?</p> <p>13 A. Yeah.</p> <p>14 Q. Where the PA would have been the person who's getting 15 the rate under which you were billing for?</p> <p>16 A. Yeah.</p> <p>17 Q. Was that 85 percent of what you would bill for?</p> <p>18 A. Yes. Whatever the rate's supposed to be.</p> <p>19 Q. So there was a financial advantage, obviously, for the 20 doctors to bill at their rate, correct?</p> <p>21 A. Yes.</p> <p>22 Q. And you said there were several hundred times during 23 2022?</p> <p>24 A. Yeah. Probably 200, several hundred over the top. I 25 didn't see that many patients.</p>
<p style="text-align: right;">Page 103</p> <p>1 Q. Were you more busy during COVID?</p> <p>2 A. Well, I didn't see new patients, so it was a different 3 busy. I was in the hospital more.</p> <p>4 Q. What was your billing like in, let's call it, 2022?</p> <p>5 A. 2022?</p> <p>6 Q. Was it up or not?</p> <p>7 A. Well, that was separate. I'm talking about COVID, like 8 the 2019 COVID.</p> <p>9 Q. Okay. Well, when did the protocols come into effect, 10 the new COVID protocols?</p> <p>11 A. During COVID?</p> <p>12 Q. That we knew?</p> <p>13 A. I didn't have a PA then, so it didn't matter. I saw all 14 my own patients.</p> <p>15 Q. I'm just trying to find out what the COVID protocols 16 came in that you're relying on in this case?</p> <p>17 A. I'm relying on...</p> <p>18 Q. What are you relying on in this case, what time period?</p> <p>19 A. From what I remember, and what I read.</p> <p>20 Q. Okay. But what was the time period where you were -- 21 where you had PAs, and you were relying on the COVID 22 protocols? What time period are we talking about here?</p> <p>23 A. 2020 until 2023.</p> <p>24 Q. Did you have a PA in 2020?</p> <p>25 A. I did have a PA, but the PA didn't always see -- I</p>	<p style="text-align: right;">Page 105</p> <p>1 Q. And under what circumstance would that occur?</p> <p>2 A. If I wasn't able to be available.</p> <p>3 Q. Because why?</p> <p>4 A. If I was on a plane or in surgery.</p> <p>5 Q. Has any PA other than my client ever billed under her 6 own provider number and not yours?</p> <p>7 A. Yes.</p> <p>8 Q. Okay. Who other than my client?</p> <p>9 A. Well, Kendall, Kyle.</p> <p>10 Q. Are you sure, or are you guessing?</p> <p>11 A. No, I know they billed under them.</p> <p>12 Q. Okay. Did you maintain a hard copy of my client's file 13 throughout the course of her employment with you?</p> <p>14 A. We had one hard copy, and it was in the Med Spa, and 15 it's gone now, so I don't know what happened to it.</p> <p>16 Q. I just asked you if you maintained a hard copy of her 17 file.</p> <p>18 A. We did, but I don't have it.</p> <p>19 Q. So where are hard copies of the files kept?</p> <p>20 A. In the manager's office.</p> <p>21 Q. I don't know what you mean by that. Give me a name.</p> <p>22 A. In Madison and Rachel's office.</p> <p>23 Q. Okay. And those are the medical assistants?</p> <p>24 A. No. Those are the practice managers.</p> <p>25 Q. I'm sorry. Okay. So where are their offices located?</p>

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<p>1 A. Yes.</p> <p>2 Q. Okay. But you know there were new procedures?</p> <p>3 A. Yes.</p> <p>4 Q. And you've referenced them here today a bit?</p> <p>5 A. Yes.</p> <p>6 Q. Something about you could be remote --</p> <p>7 A. The telehealth.</p> <p>8 Q. -- or available by, I think you said, text or something?</p> <p>10 A. Yes.</p> <p>11 Q. Right?</p> <p>12 A. Um-hmm.</p> <p>13 Q. Okay. So my question was very straightforward. You've already said there was nothing in writing that was distributed to your staff or employees about this, the change. You said that. So then I went on and I said was any training given about the new COVID procedures about doctors not necessarily having to be on-site.</p> <p>19 A. There was no training.</p> <p>20 Q. For billing?</p> <p>21 A. There was no training.</p> <p>22 Q. There was no training, okay.</p> <p>23 A. No training.</p> <p>24 Q. Hang on one second. Okay. After my client became employed at your practice, she raised some questions</p>	<p>1 Q. And what was the purpose of the meetings?</p> <p>2 A. To try to go over what her issues were, and try to figure out how to correct them.</p> <p>4 Q. Okay. And what did you figure out about how to correct them?</p> <p>6 A. We tried to explain to her that private insurers don't follow incident to billing, and that there were the COVID rules were different than she referenced something from I think was like 2007 or something, a very old reference, and that wasn't relevant.</p> <p>11 Q. Didn't she email everybody some information about the COVID rules?</p> <p>13 A. No.</p> <p>14 Q. Are you sure about that?</p> <p>15 A. I never got an email about COVID rules.</p> <p>16 Q. Did you give her anything about the COVID rules?</p> <p>17 A. No.</p> <p>18 Q. Okay. Did you put anything in writing to her explaining to her why she was allegedly incorrect, and you were correct?</p> <p>21 A. No.</p> <p>22 Q. So there's nothing at all that exists in writing where you are telling Julia Zimmerman here's why what we're doing is correct. You don't have anything to worry about. Something like that; is that correct?</p>
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<p>1 about how billing was being done, correct?</p> <p>2 A. I guess midway through her employment.</p> <p>3 Q. Okay. And what did you understand her questions were, or her concerns were?</p> <p>5 A. About when we bill the servicing provider, billing provider who we were billing under if I wasn't there.</p> <p>7 Q. Okay. And how did you learn about this? I know that Julia raised some issues with you directly, correct?</p> <p>9 A. Emailed. She emailed.</p> <p>10 Q. But she raised them with you directly, correct?</p> <p>11 A. I don't remember. I just remember I see the emails.</p> <p>12 Q. And you're on some of the emails, correct?</p> <p>13 A. Yes.</p> <p>14 Q. And didn't you talk to her directly about this?</p> <p>15 A. Afterward, yes, I did.</p> <p>16 Q. After what, after the complaint?</p> <p>17 A. She emailed, yeah, after she said something.</p> <p>18 Q. But you definitely sat down with her on several occasions because she was raising questions, correct?</p> <p>20 A. I don't recall those occasions. I just know there were a couple meetings we had.</p> <p>22 Q. And who was in those meetings?</p> <p>23 A. It would be me and Pavlina.</p> <p>24 Q. Okay. And anybody else?</p> <p>25 A. No.</p>	<p>1 A. No. I don't have anything.</p> <p>2 Q. Okay.</p> <p>3 A. That I wrote to her.</p> <p>4 Q. And Julia emailed you, and she also emailed Simrath; is that correct?</p> <p>6 A. Which email are you referring to?</p> <p>7 Q. I just am not referring to a specific one right now.</p> <p>8 I'm saying that she emailed with you and Simrath.</p> <p>9 A. Yes.</p> <p>10 Q. About many of her concerns; is that true?</p> <p>11 A. Yes.</p> <p>12 Q. Okay. And you remember that one of her concerns was the chart shouldn't contain billing diagnoses that weren't actually existent as a diagnosis from the finding. She was concerned about the diagnoses that were being listed. Do you remember that?</p> <p>17 A. Vaguely.</p> <p>18 Q. Okay. And the concern was that there was improper logging of diagnoses in charts which would open up issues in case you should get audited, correct?</p> <p>21 A. She never said that to me.</p> <p>22 Q. She never said what?</p> <p>23 A. Any of the words audited. She just said that she thought that it was more accurate. My understanding of billing diagnosis was something we were treating, and</p>